



First Newfoundland Regiment

ATTESTATION PAPER



Regimental No. 1507

Name in full Charles Moncrief Thomson Age 19
 Address Sudbury, St. John's.
 Married Single Height 5ft 5 1/2 in Weight 130
 Color Fair Hair Brown Eyes Blue
 Other distinguishing marks Wale on right hip.
 Nearest relative Mother (Mary)
 Address Sudbury.
 Dependents None
 Occupation Student Present Wage
 Previous service
 Decorations
 General Remarks
 Date of Enlistment May 28th 1915

I, Charles Moncrief Thomson, do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty, and that I will faithfully serve His Majesty in any place where I may be needed (or in the Colony of Newfoundland, as the case may be), against all His enemies and opposers whatsoever, according to the condition of my service.

Charles Moncrief Thomson

Declared before me this 28 day
 of May 1915

J. J. [Signature]
 [Signature]
 [Signature]

DESCRIPTIVE REPORT ON ENLISTMENT.

Applicable to all ranks. To correspond with entries on the Medical History Sheet.

Reg. No. 1864

Name **Charles Moncrief Thomson**

Apparent age 19 years months. Height 5 feet 5 1/2 inches.

Chest measurement { Girth when fully expanded inches.
 Range of expansion inches.

Distinctive marks **Color: Fair, Hair: Brown, Eyes: Blue.**

Other distinguishing mark: Mole on right hip.

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin **Mary Thomson, Sudbury, St. John's**

| Relationship **Mother.**

Particulars as to Marriage.

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.
 (c) Present address. (d) Signature of Officer verifying entry from certificate.

(a)	(b)	(c)	(d)
			Verified from certificate.

Particulars as to Children.

Christian Names	Date and Place of Birth	(d)
		Verified from certificate.

STATEMENT OF THE SERVICES.

Corps in which served	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. O. Pay		Signature of Officers certifying correctness of entries
					years	days	years	days	
Service towards limited engagement reckons from May 28/15									
Joined at St. John's on May 28/15 Embarked for U. K. 17/6/15.									
<p><i>Embarked for B. E. F. via Egypt 13/3/16 joined Batt. 8/4/16 We landed Beaumont Hamel 11/6/16. 24th. 5. Hap., Staples Hill 3/7/16. Arrived at England 7/1/16. 32nd. 5. Hap., Woodworth 16/2/16. 29th. 5. Hap., 16/8/16. Promoted to 6th. 12/2/17. Rejoined 5th. 5/5/19. Embarked for B. E. F. 5/8/19. Ad. 1st. Hap., Rouen V.A.S. 8/8/19. Proceeded to duty to 18th. 6. S. 29/9/19. with Batt. 30/12/19. Ad. 4th. Hap., St. Omer 2/1/19 V.A.S. 2nd. to details, St. Omer, 17/2/18. Ad. 1st. Hap., Rouen, 1/3/18. 4th. Hap., Rouen, V.A.S. 26/4/18. 2nd. to base details, St. Omer, 13/6/18. 25th. 5. Hap., Haddet, Bois, 8/10/18. 2nd. to Base Depot, Rouen, 14/11/18. Transferred to England 6. S. 27/11/18. Reported at H.M.S. for discharge 30/1/19. Reported at H.M.S. for pension 7/2/19. Approved for discharge 4/3/19. Demobilization confirmed 19/3/19.</i></p>									
Total Service forfeited as above									
Total Service towards Engagement to 18-3-19 (date of discharge) 3 years 295 days									
" " " Pension " " " " " " " "									

Regimental Number 1564

Company _____

THE
1ST NEWFOUNDLAND REGIMENT.

I hereby enlist for service at home or abroad in the King's Forces under the following conditions :

For the duration of the present war, or until my discharge.

Subject to the Army Act, the King's Regulations, and to such ordinances as may apply or may be made to apply to the British Regular Army.

Subject to the Newfoundland Volunteer Act, 5 George V., Chapter IV.

Signed B. M. Thomson

Witness Robertson

Dated at _____



_____ 191

C.R.

No. 1664 Name Thompson & M. Sqn., Batty., or Company } E Co Corps Newfoundland Date of enlistment } May 28/15 G.C. Badges } Service or Proficiency Pay }
 Date of last entry in Company Conduct Sheet } 14/12/15 No. and date of last drunk } Period not reckoning towards freedom from extra fine } Sheet No. 1 Signature O.C. Company, etc. } J. G. Bernal 2. Lewis Character

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
		Pte							

Hospital
 Work out of...

Army Form B. 122

C.R. 1564

Charles M. Thompson was attested for General Service
with the NEWFOUNDLAND REGIMENT on **May. 28th. 1915**
Regimental No. **1564** was allotted to Pte **Charles M. Thompson**

AUTHORITY:

Record Officer

Dept. of MILITIA;

March 25th. 1919.

RECEIPT.

FOR ISSUE OF RIBAND OF VICTORY MEDAL 1914-1919.

C.R. 1564

I certify that I have received an issue of
2 inches of Riband of Victory Medal-1914-1919.

for C.R. Thomson
NO. 1564 NAME C.M. Thomson

DATE *Jan 3rd 1920*

PLACE *Sudbury St. John*

C.R. 1564

Extract of DAILY ORDERS PART II ROYAL NEWFOUNDLAND
REGIMENT DEPOT ST. JOHN'S DATED MARCH 21st/19.

The Discharge of the undernoted on Demobilization
has been CONFIRMED by Officer i/c Records.

#1564 Pte. Chas. Thompson.

18/3/19.

C.R!

1564

Extract from Nominal Roll of Nfld. Regt. Embarked
13-3-16 for Egypt, transferred to B.E.F. & disembarked
Marseilles 3-4-16.

1564 Pte. C.M. Thomson.

C.R. 1564

Extract from Nominal Roll of Rfl. Regt. Draft No. 28
from 2nd Bn. Depot. to 1st Bn. B.H.F. Embarked via Folke-
stone, 6-6-17.

1564 Pte. C.M.Thomson.

~~C.R.~~

C.R. 1564

~~C.R. 1942~~

Ost. 18th, 1917.

From: Minister of Militia

To: Officer Commanding 2/1 Mfld. Regiment
Ayr, Scotland

Sir:-

I have the honour to forward the attached letter
from Mr. C. R. Thompson for your information and attention,
please.

I have the honour to be

Sir

Your obedient servant

C. R. Thompson
Major

For Minister of Militia

THE SUDBURY WATERPROOF SEAL & LEATHER
MANUFACTURING CO., LIMITED
ST. JOHN'S, — NEWFOUNDLAND

C.R. 2396

Hon. J. R. Bennett
Minister of Marine

Oct 17th 1917

Dear Sir

Yours of the 16th to hand
and I thank you for same, it was very good
of you to give the matter your attention and
I trust my son will appreciate what you have done

Yours truly

L. R. Thomson

R/

1144

Oct. 15th. 1917.

C.R. Thompson, Esq.
P.O. Box 654.
City.

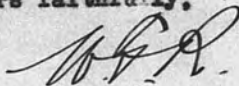
Dear Mr. Thompson,

With further reference to your letter of Sept. 10th., forwarded to me at Ottawa and to which I replied stating that I would take up this matter on my return.

I have the honour to inform you that in conformity with your wishes, I have forwarded your application to the Officer Commanding and recommended the same to his favourable consideration.

I feel sure, from what you say of your son, that his work has merited promotion which, no doubt, will be conferred upon him by his Commanding Officer in due course.

Yours faithfully,



Minister of Militia.

*Application forwarded
by C.R.D. to O.C. Depot.*

C.R. 1564

Extract of DAILY ORDERS, PART II, Depot St. John's,
dated March 5th/19.

The discharge of the undernoted on Demobilization has been
APPROVED by O.C. Discharge Depot on noted date.

#1564 Pte. Chas. Thompson.

4/3/19.

CR. 1564

Extract from Preliminary Report of Medical Board held on Friday
Feb. 21st 1919.

1564 PTE. Thomson, C.M.

from the Army
Recommended Discharge as ~~Permanently Unfit.~~ A111

C.R. 1564

Extract from Number 4212 of the Royal Navy. Regt.
Major S. J. Corston, Jan. 30th, 1919.

1564 Thompson.

C.R. 1564

Extract from Daily Orders Part II Unit The Royal BCI. Regt.
St. John's, 11-2-19.

The undersigned returned from Overseas and Reported at Depot.
7-2-19.

Registered on A.F. 1172.

1564 Pte. Chas. Thompson

C.R. 1564

Extract from Telegram received from Synoptical Dec. 30th 1918.

In answer your telegram December, 26th., 1564 Thompson
Depot.

C.R. 1564

Extract from telegram to Synoptical London, Dec. 23rd, 1918.

Inform ~~1564~~ 1564 Thompson.

C.R. 1564

Extract from CASUALTIES from P.&R.O., London, dated 4/12/18.

The following has reported to 2nd Bn. from Base Depot,
Rouen, 28/11/18.

1564 Pte. C. Thomson

Authority: Mess from Medical Officer, 2/Battalion.

C.R. 15-64

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt., France, [REDACTED] 30-11-18.

1564 Pte. C. Thompson.

To England "B" 27-11-18.

C.R.

1564

Extract of Orders by Lt. Col. B. J. Barton B.S.O. Commanding
2nd Battalion Royal Newfoundland Regiment. NOV 28 1918

The following having reported back from the 1st Batta.
is taken on the strength and posted to "H" Company

1564 Pte. Thomson as from 28/11/18

C.R. 1569H

Extract from War Office List No. h. a. 31092.

DIS. TO 5 REST CAMP ST. MARTINS BOULOGNE EX 10 CON.DEP.
27th., October 1918.

#1564 Pte. C. W. Thomson

FOIL

C.R. 1564

Extract from War Office List. No. H.A. 30828

ADMITTED 10 CON. DEP. ECAULT 24 OCT 1918.

#1564 pte C. M. Thomson.

BC.

BOILS MILD.

C.R. 1564

Extract from List of Wounded and Sick N.C.Os. and Men of the Expeditionary
Force -- France, dated 16th. October, 1918.

List No: H.A. 30083.

1564 Pte. V.C. Thomson

1/Newfoundland.....~~Boils~~ Boils Mild.....Adm. 25th. Gen. Hos.
Hardelet 8th. October, 1918.

C.R. 1564

Dec. 31st 1918.

Dear Mrs. Thomson:-

I beg to inform you that we have received an answer to the cable we sent to our Pay and Record Office, London, enquiring the whereabouts of your son #1564 Pte. Chas. F. Thomson, which states that he is now with the 2nd Battalion, of the Royal Newfoundland Regiment, Hazeley Down Camp, Winchester, and upon any further news concerning him we will at once communicate with you.

Yours faithfully,



Lieut.
CASUALTY OFFICER.

Mrs C. R. Thomson,
Sudbury,
Water Street W.
City.

WWV/MP.

C.R.

1564
Dec. 23rd 1918.

Dear Mrs. Thomson :-

We have been notified by mail from our Pay and Record Office, London, that your son #1564 Pte. Chas. M. Thomson, had reported back to the 2nd Battalion Winchester, from the Base Depot Rouen on the 28/11/18, and his address will now be:-

#1564 Pte. C. E. Thomson,
Royal Newfoundland Regiment,
Hazeley Down Camp,
Winchester, Hants,
England.

Yours faithfully,


Lieut.

CASUALTY OFFICER.

Mrs. C. E. Thomson,
Sudbury,
Water Street West.
City.

WW/MP.



C.R. 1564

SICK AND WOUNDED M:C:O'S AND MEN OF THE EXPEDITIONARY FORCE - FRANCE.

No. TWO RECORD OFFICE . Y O R K.

No. H. A. 24954.

Dis to Detls St.Omer ex 4 Sty H.Arques 13 June 18.

63742	Pte. Wilson R.	1/6	W.Yorks.R.	Scabies.
23793	" Gardner J.	2.	W.Riding.R.	Multiple Boils.

Trans to Base.ex.4.Sty.H.Arques 13 June 18.

23438	Pte. Woodhouse J.	1/7	W.Riding.R.	Scabies.
62935	" Allsopp A.	1/7	W.Yorks.R.	Scabies.
1205	L/c. Meverby E.H.	12.	Yorks.L.I.	V.D.S.
54887	Pte. Moodie S.	21.	W.Yorks.R.	do.
200184	Sgt. Regan J.	1/5	Y.&.L.R.	do.
36625	Pte. Jones G.	9.	Yorks.L.I.	V.D.G.
33982	" Clarke A.	1/7	W.Riding R.	do.
62858	" Edwards W.T.	1/5	W.Yorks. R.att.11.Corps	do.
			Reinf. Camp.	
266572	" Stockdale J.	5.	W.Yorks.R.	do.
47503	" Restrick F.G.	1/5	Y.&.L.R.	do.
15803	Cpl. Pizkey W.R.	1/7	W.Riding.R.	do.
21325	Pte. Smith L.	12.	W.Yorks.R.att.9.TMBty.	do.

Adm.4.Sty.H.Arques 13 June 18.

38977	Pte. Farrar J.F.	6.	Y.&.L.R.	Boils.slt.
62624	" Lewis E.A.	1/6	W.Yorks.R.	Influenza.slt.

NEWFOUNDLAND EXPEDITIONARY FORCE

No. H. A. 24954.

Dis to Detls St.Omer.ex.4.Sty.H.13 June 18.

1564	Pte. Thomson C.M.	1.	Newfoundland R.	V.D.S.
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1349A

WOUNDED AND SICK N.C.Os AND MEN OF THE EXPEDITIONARY FORCE - FRANCE.

C.R. 1564



INFANTRY RECORD OFFICE - L I C H F I E L D (PART I) LIST NO. H.A.20276.

90197 Pte. Fox, J.	2/5 N. & D.R.	Nephritis.....	Adm.6	Sty.H.Frevent	2 March 18.
9562 Pte. Hopkinson, H.	16/Lab.Co.late	Tonsillitis Mild...	Adm.11	Sty.H.Rouen	1 March 18.
	12/Linc.R.				
72469 Pte. Pollett, B.A.	16/N. & D.R.	ICT.Heel R.Mild...	Adm.11	Sty.H.Rouen	1 March 18.
85891 Pte. Knighton, H.	17/ -do-	Diarrhea Mild.....	Adm.11	Sty.H.Rouen	1 March 18.
25271 L/C. Spenser, F.	16/ -do-	Impetigo Cont.Mld.	Adm.11	Sty.H.Rouen	1 March 18.

INFANTRY RECORD OFFICE - L I C H F I E L D (PART TWO) LIST NO. H.A.20276.

39165 Pte. Riley, H.J.	4/S.Staff.R.	Nephritis.....	Adm.6	Sty.H.Frevent	1 March 18.
200628 Sjt. Thomas, J.	2/5 -do-	Urethritis.....	Dis.to	Duty ex 6 Sty.H.Frevent	1 March 18.
39871 Pte. Elkin, J.W.	8/Leic.R.	NYD.Mild.....	Adm.11	Sty.H.Rouen	1 March 18.
240571 Cpl. Fisher, J.	6/S.Staff.R.	PUO.....	Dis.to	Camp Rouen ex 11 Sty.H.	2 March 18.

INFANTRY RECORD OFFICE - W A R W I C K (PART I) LIST NO. H.A.20276.

27487 Pte. Seal, E.	14/Glouc.R.	Scabies.....	Dis.to	Dtl5.St.Omer ex 4 Sty.H.	2 March 18.
203882 Pte. Iles, A.	14/Glouc.R.att.	NYD.Mild.....	Adm.10	Sty.H.St.Omer	28 Feb.18.
	2 Cps.Sch.12 Entr.Br.				
29640 Pte. Houston, G.	2/5 R.War.R.	NYD.....	Adm.11	Sty.H.Rouen	1 March 18.
307296 Pte. Edge, A.	2/8 -do-	Hernia R.Ing.Mild.	Adm.11	Sty.H.Rouen	1 March 18.
16942 Pte. Chisholm, J.	4/5 Bl.Watch.late	ICT.L.Knee Mild...	Adm.11	Sty.H.Rouen	2 March 18.
	2/5 War.R.				
190651 Pte. Cook, ...H.	212 Div,Emp.Co.	Scabies Mild.....	Adm.11	Sty.H.Rouen	2 March 18.
	late 17/Glouc.R.				
240185 Pte. Wall, T.	3/6 R.War.R.	Incont.Urine Mild.	Adm.11	Sty.H.Rouen	2 March 18.

INFANTRY RECORD OFFICE - W A R W I C K (PART TWO) LIST NO. H.A.20276.

24493 Pte. Ingham, T.	5/0.& B.L.I.	Myalgia Mild.....	Adm.11	Sty.H.Rouen	1 March 18.
285187 Pte. Rockey, G.	5/ -do-	PUO.Mild.....	Adm.11	Sty.H.Rouen	2 March 18.
25466 Pte. Pink, A.H.	5/ -do-	PUO.Sev.....	Adm.11	Sty.H.Rouen	2 March 18.

NEWFOUNDLAND CONTINGENT LIST NO. H.A.20276.

1564 Pte. Thompson, C.H.	1/Newfoundlands.	VDG.Mild.....	Adm.1	Sty.H.Rouen	1 March 18.
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400A.

C.R. 1564

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. In the Field. dated 23-6-18.

#1564 Pte. C.R. Thompson.

Admitted Hospital Venereal 27-4-18 dis. 13-6-18.

C.R. 1564

Extract of Casualty received from Pay & Record Office, London,
dated 6th May 1918.

1564 Pte C.M.Thomson.

Admitted 4th Sty.Hosp.Arques 26 April 1918.

C.R. 1564

Extract of Casua:ty received from Pay & Record Office,
London, dated March 1st, 1918.

Extracts from H.A. 19740 (Colonial) & H.A. 19854
(Colonial). ✓

O.C. 4 Sty. H. Arques reports:

#1564 Pte. C. Thomson. ✓

V.D.G. Dis.to Dtls St.Omer

15th Feb'y 1918.

C.R. 15-64

Extract from CASUALTIES Expeditionary Force - France. Dated Mar 1 18.

Extract from H.A. 19740 (Colonial) & H.A. 19854 (Colonial.)

Extract from No. H.A. 19854. (Colonial.)

O. C. 4 STY. H. ARQUES reports:-

1564 Pte. C. Thomson

1 Newfoundland V.D.G.....Dis. to Dtls. St. Omer 15 Feb. 18.

C.R. 1564

Extract of Casualties received from Pay & Record Office,
London, dated January 14, 1918.

#1564 Pte. C. Thomson. ✓

V.D.G., Admitted 4th Stationary Hospital, Arques St. Omer
January 8, 1918.

C.R.

1564

Extract of Communication received from Pay & Record
Office, London, dated August 17, 1916.

#1564 Pte. C. Thompson.

Discharged from Hospital granted furlough from
Light.
16/8/16 to 25/8/16. /Duty Class B. likely to be
fit for service overseas within 3 Months.

C.R. 1564

Communication

Extract of ~~the file~~ received from G.O. Sri Hon. Gen. Hosp.
to G.I/o Records, 2nd. Contingent, 58 Victoria Lt. S.S.
dated July 31, 1916.

In accordance with your Memo of July 30th, I beg to inform
you that the undermentioned man was transferred to the Gen.
Hosp., Brooklands 21/7/16, Military Hospital, Cambridge.
21/7/16.

#1564 Pte. C.M. Thomson. ✓

C.R. 1564

Extract of Casualties received from Pay & Record Office,
London, dated July 31, 1916.

(Extract from Army Form B 213, from O.C. 1st. Nfld. Regt.
dated 11/7/16.)

#1564 Pte. C₂³ Thompson. ✓

Wounded in Action 1/7/16.

C.R. 1564

Extract of Casualties received from Pay & Record Office,
London, dated July 12, 1916.

#1564 Pte. C.M. Thomson. ✓

Gunshot wound Left Leg. slight.

Admitted 24th General Hospital, Etaples 3rd July 1916.

C.R. 1564

Extract of Casualties received from War & Record Office,
London, dated July 8, 1916.

#1564 Pte. C. Thomson. ✓

Gunshot wound Left Thigh.

Admitted Sir London General Hospital, Wandsworth, S.W. 8.
July 8 6th, 1916.

C.R. 1564

Extract from Nominal Roll Embarked St. John's for Overseas, per
S.S. "Calgarian" "F" June, 19.1915.

1564 Pte. Thompson C.W.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 1564 Rank Pte. Name Thompson B.M.
 Date of Enlistment 27-5-15 Address Waters West District St. Johns
 Occupation Student Classification for Discharge B Medical Category A.III
 Recommendation S.M.B. Disability Rating nil

Passed to Demobilization Officer with following documents:—

N.F. P 36	B 268	B 121	1	N.F. Med.	D.F. 1	
B 178	W 3494	B 122		Board 1st	" 2	
B 178a	1 D 400A	1 B 1915		do 2nd	" 3	3
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	2 D 400C	Form K		do 4th	" 5	
B 179b	B 103	2 ME 2			" 6	
B 179c	B 120	M 93				

Date 3-3-19 *H. Mearns*
 for O.C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

Employment

Particulars passed to Vocational Officer for information and action.

Date 4-3-19 *Asst. Dir. C. & P.*

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$100.00

(b) ~~Clothing~~ Supplied

Date 4-3-19 *ASD* O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. _____ to his home at _____ and Release Certificate No. 1372 issued.

Date 4-3-19 [Signature]
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 18-3-19

Date 4-3-19 [Signature]
Depot Paymaster.

Discharge approved for 4.3.19

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	1	N.F. Med.	D.F. 1	
F 178	W 3494	B 122		Board 1st	" 2	1
B 178a	D 400A	B 1915		do 2nd	" 3	2
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2	2		" 6	
B 179c	B 120	M 93				

Date 4.3.19 [Signature]
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—
Officer i/c Records.
Board of Pension Commissioners.
with following additional documents.

Eligible for War Service Gratuity
[Signature]
O. C. Discharge Depot.

Date MAR 4 1919

Received the above noted documents from O. C. Discharge Depot.
Date March 7, 1919 [Signature]

The Royal Newfoundland Regiment

CIVILIAN RE-ESTABLISHMENT ON DEMOBILIZATION

No. 1564 Rank Cpl Name Edna Thompson
 Former Occupation Student Address Wals St District St John
 Class 10 Medical Category A III Disability Rating
O.C. Discharge Depot.

Above noted man states he has no employment in prospect on his discharge. His personal wish is to obtain a position as Wash in gen. School. His case has therefore been referred this day to the Vocational Officer for action, and his discharge is therefore held in abeyance.

Date 4 3/19 confirmed Geo Leahy CMDR Wks Capt
 To be forwarded Orderly Room in Duplicate Act Demobilization Officer



EXTRACT FROM STATEMENT OF A/C TO 31-1-19 FROM PAY & RECORD
OFFICE. LONDON

1564 Pte Thompson, C. Dr Bal 4:6

This transferred to Pay Office 7-4-19

Reg. No. 1064 Rank Pfc Name Thomson, Chas
Attested Address Sudbury.
Allotment..... Allottee
Date of Allotment..... Returned from Overseas 2-19.
Embarked for Overseas Cause Discharge

21-2-19. Rec - Dis - from the Army a III

MAR 4 1919

PASSED TO DEMOBILIZATION OFF.

4. 3. 19

DISCHARGE APPROVED ON DEMOBILISATION.



THE ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS

St. John's, Newfoundland,

Mar. 4th, 1919 191

From Officer Comanding,
Discharge Depot
Office of D.M.S.
To ~~Board of Pension Commissioners,~~
Militia Bldngg

1564 Pte. C. Thompson

Above noted man was before the Standing Medical Board
on 22-2-19 and was recommended for discharge as perman-
ently unfit and have X Ray photograph taken.

His discharge on demobilization has been approved by the
Officer Commanding, effective from 4-3-19 and I am send-
ing him herewith for your attention and necessary action please.

Copy of his Medical Board will be forwarded you in due
course.

A. Staley Case

Captain

Asst. Adj. Discharge Depot

Copy to Bd. of Pension Commissioners

C. M. Jackson

1564

P.R.O.

G. W. Jackson

1564

P.R.O.



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Charles Maurice Thompson, Regl. No. 1564
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
Dollars and Fifty Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons
 concerned, viz.:

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
1	Mother	Mrs. C. R. Thompson	Judiciary Water St St. John's	
0				
0				
0				
Cancelled 1/10/16				
Commencing June 12 th				
Total Allotment, \$				

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, counter-signed by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

(Sig.)
 Officer Commanding
 Company

(Sig.) C. M. Thompson
 (Rank) Private

St. John's
June 4th 1915

Admitted 6-7-16.

Army Form W. 3016.

No. _____

Date Augt 16¹² 1916

(1) To the Officer i/c Records,

58 Victoria Street
S.W. (Station.)

(2) The Officer Commanding,

Newfoundland Cont
Avn. (Station).

(3) The Paymaster,

58 Victoria Street
S.W. (Station).

Regimental No. 1564

Rank and Name Pte Thomson. G.

Regiment or Corps 1st Newfoundland

has been granted a furlough from Augt 10¹² to Augt 25¹²

His address while on leave will be:—

58 Victoria Street
S.W.

This man has been furnished with a warrant to Victoria and given an advance of £1 (one pound).

I consider he is fit for ^{{Duty.} Light duty and likely to be fit for service overseas within three months.

Horace Jagan Capt. R.A.M.C. (F.)
Officer in charge _____ Hospital,
Registrar, R.A.M.C.I.
3rd London General Hospital, (Station).
WANDSWORTH, S. W.

* Strike out that which is inapplicable.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office.

ORIGINAL

UNFOUNDED AND CONTINGENT

SEP 29 1916
RECORDS OFFICE

L. (No) 1564 (Rank) Pte (Name) G. M. Thompson

whereby apply for cancellation of allotment made by me on
No. P.S. No 1021^a dated June 12/16 in favour
of Mrs G R Thompson Sudbury Water Street
per diem. Such cancellation to take place from (inclusive)
the 1st day of October 1916

I agree to accept all risks and consequences of this
application failing to reach Headquarters St. John's by mail in time to
become operative at above mentioned cancelling date and that in the event
of such non-delivery by mail and thereby the allotment continuing to be
paid to the Allottee, I also agree to such further stoppages as may be
necessary being made against me in the Pay Books or otherwise to refund
such overpayments amount or amounts.

Dated Sgt.
Sept. 27th 1916

G. M. Thomson.
Allottee.

Approved and Witnessed
R. S. Russell
C.O. "H." Company.

NOTED
J. Ruwacki
C.Q.M.S
Date 29/9/16 H Coy

Attention is drawn to the fact that Allotments are payable
by Headquarters by Calendar month not Regimental month and therefore
reasonable time must be allowed for the delivery of this request at
St. John's in order to become operative.

To be made out in triplicate and sent to Paymaster & Co. /
Records who will forward original by first mail to Headquarters
St. John's duplicate by the following and retain triplicate

NOTED
A. Martin
Date 29/9/16 Coy

18TH CASUALTY CLEARING
 Army Form O. 1727
 6 NOV 1917
 (Patent 18 Cas. Reg. Str)

FAMILY REMITTANCES

Corps 1st. L.I.V. F.L.D. { Squadron, Battery, or Company } (Patent 18 Cas. Reg. Str)

STATEMENT OF PAY AND ALLOWANCES not drawn by officers, civilians (including subordinates), warrant officers, non-commissioned officers, and men during the month of October, which it is desired to remit for payment at home. (In the case of inter-colonial remittances the name of the colony should be substituted for home.)

Remitter		Name, christian name and address of person to whom payment is to be made	Amount			Signature of remitter
Regtl. No.	Rank Name		£	s.	d.	
156H	Pte. THOMPSON C.M.	MRS MARY THOMPSON Subbrary St. Johns Newfoundland	10	0	0	C.M. Thompson
<i>Rem No 71</i>						
<i>[Signature]</i>						
<i>Certified that Above Amount (in Sterling)</i>						
<i>has been entered in A.B. 644</i>						
			10	0	0	Certified correct <i>[Signature]</i> Officer Comdg.

The sum of (in words) _____ will be credited by me in my account for _____ 1917 under the head of "Remittances," and I certify that the remittances included in this return are strictly in accordance with regulations.

Station _____ Paymaster.
 Date _____ 1917 .



FAMILY REMITTANCES

Corps 1st N.F.L.D. { Squadron, Battery, or Company } (Patient 18 Cas. Bldg. Str)

STATEMENT OF PAY AND ALLOWANCES not drawn by officers, civilians (including subordinates), warrant officers, non-commissioned officers, and men during the month of October, which it is desired to remit for payment at home. (In the case of inter-colonial remittances the name of the colony should be substituted for home.)

Remitter			Name, christian name and address of person to whom payment is to be made	Amount			Signature of remitter
Regtl. No.	Rank	Name		£	s.	d.	
1564	Pte.	THOMPSON C.M.	MRS MARY THOMPSON Subbury St John's Newfoundland	10	0	0	C.M. Thomson
<i>Remittance No 71.</i>							
Certified that Above Amount (in Sterling) has been entered in A.B. 64							
				10	0	0	Certified correct Officer Comdg.

The sum of (in words) _____ will be credited by me in my account for _____ 191____, under the head of "Remittances," and I certify that the remittances included in this return are strictly in accordance with regulations.
Station _____ Date _____ 191____ Paymaster.

13658/1

10th December

Mrs. Lizzie Young,
49, St. Leonard's Road,
Ayr, N. B.

4: 0: 0

1564, Private O. M. Thompson,
1st Newfoundland Regiment,

J.M.

MK

Forward to
Headquarters
Newfoundland Force



Victory St

~~13658~~
13658

London

To Group M

MP 27
13659 / 20

(ORIGINAL)

Army Form O.1727A.

FAMILY REMITTANCE FORM 1917

(For use with Expeditionary Forces when a Soldier wishes to remit from the Creditor Balance on his Pay Account.)

This Form to be forwarded in Triplicate to the Paymaster in charge of the Clearing House, who will transmit the Original and Duplicate Forms to the fixed-centre Paymaster.

The attention of the Officer Commanding is drawn to the necessity of entering every detail to avoid delay in payment.

Unit or Formation

Newfoundland Regt. of, or attached to Patient in base

I, No.

1564

Rank

Plt

Name

C. M. THOMPSON

request that the sum of £4- s. — d. (FOUR Pounds — Shillings

Pence) be debited to my Pay Account, and remitted by Money Order to:—

Full Christian Name of person to whom payment is desired

LIZZIE

Surname of person to be paid

YOUNG

MRS

Full Postal Address of person to be paid

49 St. Leonard's Rd
AYR.

PAY
- 4 DEC 1917

Money Order Office (if known) at which payment is desired

AYR.

Signature of Soldier Remitting.

Date

29. 11. 1917

THE STAFF PAYMASTER I/C CLEARING HOUSE, BASE.

Please pass this Form to the Home Paymaster for payment of the above sum,* which I have entered in the Soldiers' Pay Book (Army Book 64). The last four payments made to this Soldier are as follows:—

Clearing House Date Stamp to be impressed here, ON ORIGINAL COPY ONLY, when the form is dispatched to the fixed-centre Paymaster.

Date	25/10/17	Amount	0.17.27
Date	45. 10. 17	Amount	10 Francs
Date	29. 10. 17	Amount	10
Date	16. 11. 17	Amount	10
Date	27. 11. 17	Amount	10

Date

29. 11. 1917

Officer Commanding.

* If the Soldier pays cash to his Commanding Officer for Remittance Army Form O. 1/27B should be used.

The above sum has been debited to the Soldier's Account.

Date

191

Paymaster.

Station

The original copy of this Form, accompanied by proof of payment, will be used to support the charge against Vote I. C. 2.

(DUPLICATE)

Army Form O.1727A

FAMILY REMITTANCE FORM

(For use with Expeditionary Forces when a Soldier wishes to remit from the Creditor Balance on his Pay Account.)

This Form to be forwarded in Triplicate to the Paymaster in charge of the Clearing House, who will transmit the Original and Duplicate Forms to the fixed-centre Paymaster.

The attention of the Officer Commanding is drawn to the necessity of entering every detail to avoid delay in payment.

Unit or Formation

Newfoundland Regt. Patient in bees

I. No.

1564

Rank

Name

S/M C.M. THOMPSON

request that the sum of £ 4 - s. - d. (FOUR Pounds) Shillings

Pence) be debited to my Pay Account, and remitted by Money Order to:-

Full Christian Name of person to whom payment is desired

LIZZIE YOUNG

Surname of person to be paid

MRS

Full Postal Address of person to be paid

49 St. Leonards Rd AYR.

Money Order Office (if known) at which payment is desired

AYR.

Date

29. XI. 1917

1917

Signature of Soldier Remitting

C.M. Thompson

THE STAFF PAYMASTER I/C CLEARING HOUSE, BASE.

Please pass this Form to the Home Paymaster for payment of the above sum, which I have entered in the Soldiers' Pay Book (Army Book 64). The last four payments made to this Soldier are as follows:-

Date	25/10/17	Amount	0.1727
Date	15. 10. 17	Amount	10 Francs
Date	29. 10. 17	Amount	10
Date	16. 11. 17	Amount	10
Date	27. 11. 17	Amount	10

Clearing House Date Stamp to be impressed here, ON ORIGINAL COPY ONLY, when the form is dispatched to the fixed-centre Paymaster.

Date 29. XI. 1917

Officer Commanding

M. W. L. St. L. No. 6. B. 6. 8

* If the Soldier pays cash to his Commanding Officer for Remittance Army Form O.1727B should be used.

The above sum has been debited to the Soldier's Account.

Date 1917

Paymaster.

Station

The original copy of this Form, accompanied by proof of payment, will be used to support the charge against Vote I. C. 2.

(TRIPLICATE.)

Army Form O.1727A

FAMILY REMITTANCE FORM.

(For use with Expeditionary Forces when a Soldier wishes to remit from the Creditor Balance on his Pay Account.)

This Form to be forwarded in Triplicate to the Paymaster in charge of the Clearing House, who will transmit the Original and Duplicate Forms to the fixed-centre Paymaster.

The attention of the Officer Commanding is drawn to the necessity of entering every detail to avoid delay in payment.

Unit or Formation

Newfoundland Regt. of, or attached to, Sabien in bees

I, No.

1564

Rank

SG

Name

C. M. THOMPSON

request that the sum of £4 s. d. (FOUR Pounds Shillings Pence) be debited to my Pay Account, and remitted by Money Order to:—

Full Christian Name of person to whom payment is desired

LIZZIE

Surname of person to be paid

YOUNG MRS

Full Postal Address of person to be paid

49 St. Leonards Rd AYR.

Money Order Office (if known) at which payment is desired

AYR.

Date

29. XI. 1917

Signature of Soldier Remitting.

THE STAFF PAYMASTER I/C CLEARING HOUSE, BASE.

Please pass this Form to the Home Paymaster for payment of the above sum,* which I have entered in the Soldiers' Pay Book (Army Book 64). The last four payments made to this Soldier are as follows:—

Clearing House Date Stamp to be impressed here. ON ORIGINAL COPY ONLY, when the form is dispatched to the fixed-centre Paymaster.

Date	25/10/17	Amount	0.1727
Date	15. 10. 17	Amount	10 Francs
Date	29. 10. 17	Amount	10
Date	15. 11. 17	Amount	10
Date	27. 11. 17	Amount	10

Date

29. XI. 1917

Signature of Officer Commanding

no. 6. B.B.S

* If the Soldier pays cash to his Commanding Officer for Remittance Army Form O. 1727B should be used.

The above sum has been debited to the Soldier's Account.

Date

1917

Paymaster.

Station

The original copy of this Form, accompanied by proof of payment, will be used to support the charge against Vote I. C. 2.

1564 W. C. M. Thompson

2^d Draft.
50

Hospital \$1-10-0 ✓

Balance 17/3/6 ✓

1. 3. 5 ✓

Receipts 2. ~~23~~ 6

From 18/3/6 - 17/8/6 = 153 0/4
Cto. = 91. 80

18 17 3 ✓

2 13 6

20. 0. 8

3-13-6 ✓

3-13-6

9/10/6

16-7-2

Paymaster
58 Victoria St. File

No. 1564 Pt. Thompson Co.

~~This man is on leave and could you pay him
balance due to this date please.~~

~~St. H. Coy. Pay Book. 31. 2. 9~~



~~AK~~
to
J. M. H. Capt

1ST N. W. FOUNDLAND REGIMENT
PAY & RECORD OFFICE

Ref. No. 4287

Recd. 7/18/17

Ac'd. 8079/5 8/18/17

File No.

From O. Corpot

To

Paymaster

Sir,

Pls. C. Thompson # 1564

This man proceeded overseas
with A111 draft, leaving here
9.20 A.M. 4/18/16.

would you kindly attend
to enclosed document and
forward the amt to add on
page 4., charging Thompson's %
with same.

J. M. M. Major
O. Corpot.
Newfoundland
Rest.

ayr.
4/18/17.

8079/5

2

Paymaster & O. i/c Rds.,
Newfoundland Contgt.,
58, Victoria St.,
S.W. 1.
Officer Commanding,
Depot,
2/2st Newfoundland Regt.
Ayr. N.B.

Pay & Record Office,

8th August, 7.

No. 1564, PTE. C. THOMPSON.

With reference to your memorandum 6/8/17 (4281), and relative to the apprehension of the above named Soldier: these charges are paid by the Command Paymaster and are not debited against the Soldier's account.

Do you authorise the payment of a Reward? If so, kindly complete bottom section of Page 4, and forward the form to the Command Paymaster, Scottish Command, 52, North Bridge, Edinburgh, please.

Major,

Paymaster & O. i/c Records.

4663/1

25th March

8

Mrs. L. Young,

49, St. Leonards Road,

Ayr, N. B.

5: 0: 0

1564, Pte. C. Thompson,

Royal Newfoundland Regt.

7938

J

TELEGRAM & CABLE ADDRESS:

"PAYCANEX" LONDON.

Please address all communications to—

"CHIEF PAYMASTER"

and quote

No. Cashiers 20318.

OVERSEAS MILITARY FORCES OF CANADA,

PAY OFFICE, 7, MILLBANK, LONDON, S.W. 1.
March 20th, 1918.

To: Headquarters.
Newfoundland Contingent.
Victoria Street, S.W. 1.

Remittance Roll,

Enclosed please find remittance roll in
duplicate forwarded to this office in error.



W. C. Stewart

~~Capt.~~
for Colonel-CHIEF PAYMASTER.

4656/1


Jay

FAMILY REMITTANCES.

Army Form O. 1727.
(In pads of 150).

Corps 1st Newfoundland { Squadron, Battery, or Company } A. Co.

STATEMENT OF PAY AND ALLOWANCES not drawn by officers, civilians (including subordinates), warrant officers, non-commissioned officers, and men during the month of Feb 1918 which it is desired to remit for payment at home. (In the case of inter-colonial remittances the name of the colony should be substituted for home.)

Remitter		Name, christian name and address of person to whom payment is to be made	Amount			Signature of Remitter
Regtl. No.	Rank		£	s.	d.	
	<u>To be paid at</u>					
<u>15th Bn.</u>	<u>Pte. Thompson</u>	<u>G.P.O. Ayr.</u>				
		<u>Mr Lizzie Young</u>				
		<u>49. St Leonards Road</u>				
		<u>Ayr. Scotland</u>				
	<u>Extract from abct.</u>		<u>5</u>			<u>C. M. Thomson</u>
	<u>11/2/18 10 pence</u>					
	<u>21/2/18 10 pence</u>					
	<u>31/2/18 15 pence</u>					
	<u>23/2/18 5 pence</u>					
	<u>This man at present a patient in</u>					
	<u>No 1 State HP</u>					
<u>PA 5-0-0</u>						
<u>PA 23-3-18</u>						
	<u>certified Entry has been made in ABct</u>					
	<u>AP Am with Licence</u>					
Certified correct		<u>Officer Comdg.</u>				
		<u>No 1 State HP</u>				

The sum of (in words) _____ 191 , under the head of "Remittances," will be credited by me in my account for _____ and I certify that the remittances included in this return are strictly in accordance with regulations.

Station _____ Paymaster.
Date _____ 191 .

CHARGE.

1st - Newfoundland Regt Army Form B. 252.
(See King's Regulations.)

Latent in
No. 6. 6. 6. } **BATTERY
SQUADRON
TROOP or
COMPANY**

CHARGE against No. *1564* *Pl. G. Thomson.*

Place	Date of Offence	Offence	Names of Witnesses	Punishment awarded	By whom awarded
<i>In the Field</i>	<i>30/10/17</i>	<i>Absent from duty 9 pm to 8 am 31.10.17 (11 hrs)</i>	<i>Sgt Mills Sgt Pink Ramb.</i>	<i>Inferts 3 days pay.</i>	<i>W. G. Lamb</i>



W. G. Lamb
W. G. Lamb

Commanding Battery, Squadron, Troop or Company.

WESTERN UNION



ANGLO-AMERICAN

DIRECT UNITED STATES

CABLEGRAM

WUC

Prefix _____ Code _____		At _____		FOR STAMPS
WORDS	CHARGE	To _____	By _____	
		VIA WESTERN UNION		THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.

27/12/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To THOMSON

SUDBURY STJOHNS (Newfoundland)

SEASONS GREETINGS CHEERIO

CHARLEY THOMSON

Charley Thomson 15/6/18

8/-

CHARGED
 PAY LEDGER.....
 Date 10/1/19 by *ESTH.*

CHECKED.
W.A.
 10/1/19

Authorised.

NOT TO BE TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature _____

Address **58 Victoria St. S.W. 1.**

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.
 In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *Royal Newfoundland* } Former Trade or Occupation }
 2. Regtl. No. *15 Coy* 3. Rank. *Pte* } 7a. If the soldier claims previous service in Army, he should state—
 4. Name *THOMPSON* } (a) Former Regts. or Corps; with Regtl. Nos.
 (Surname) (Christian Names)
 5. Age last birthday.....
 6. Posted for duty on..... at.....
 in category (or grade).....
 8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty? (b) Date of Discharge;
 (c) Cause of Discharge.
 9. If a Court of Inquiry was held on an injury state :—
 (a) When (d) Particulars of Pension or Gratuity (if any)
 (b) Where
 (c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability.
 12. Place of origin of disability.
 13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

*Gen. Whaley July 15th 1916,
 He stated "F.B. still in situ". Does not cause any discomfort. Returned France Aug 1917 and returned from Rouen 29th Nov 1918. Bled French Sect.*

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | Yes | |
| (ii.) Previous active service... .. . | No | |
| (iii.) Climate in pre-war service | No | |
| (iv.) Ordinary military service before the war | No | |
| (v.) Serious negligence or misconduct on the man's part. } | | No V.D. Gained |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } N.A.

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?

(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

The Toes are red, the skin slightly tight easily becoming cold. Condition improving

16. Was an operation performed? If so, when and what was its nature?

17. If not, was an operation advised and declined?

18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

20. Do you recommend—

(a) Discharge as permanently unfit?

(b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

*Repatriated
J. J. Jones M.D.
ROYAL NEWFOUNDLAND REG.*

Station

Medical Officer in charge of case.

Date

* Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause

U
Thompson, Chap.

1564

Ray Sept.

March 18, 1919

#1564 Pte. Charles Thompson,
Water St. West.

City

Dear Sir:-

Please find enclosed "Discharge Certificate
No. 1307."

Yours truly,

Captain,
Paymaster & O.i/c Records

Enc 1 1.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 1564 Rank Pte Name Hanson L.M.
 Date of Enlistment 27.5.15 Address Water Street District St. John's
 Occupation Student Classification for Discharge B Medical Category A.III
 Recommendation S.M.B. _____ Disability Rating 7th

Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 3-3-19

H. Hanson
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment

I am not in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

Date 4.3.19

Arthur Caplan

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$100.00

(b) Clothing Supplied _____

Date 4-3-19

ASD
 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 1372 to his home at and Release Certificate No. issued.

Date 4-3-19
W. Dicks Capt.
 Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 18-3-19

Date 4-3-19
 for *H. W. H.*
 Depot Paymaster.

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACT

Discharge approved for 4.3.19.

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 4.3.19.
W. Dicks Capt.
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:—
 Officer i/c Records.
 Board of Pension Commissioners.
 with following additional documents.

Eligible for War Service Gratuit

Date MAR 4 1919
R. H. Sait Capt.
 O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.

Date

To be used only for Special Reserve Recruits, and for Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY

Surname Thomson OF Christian Name Charles M.

Table 1.—GENERAL TABLE.

Birthplace:—Parish St. John's County Q. F. L. D.

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	at	on	at
Examined	27 th day of May 1915	St. John's	day of 191	
Declared Age	19 years	days	years	days
Trade or Occupation				
Height	5 feet 5 1/2 inches			
Weight	120 lbs.			
Chest Measurement	Girth when fully expanded	33 inches		
	Range of expansion	3 inches		
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm	1		
When Vaccinated	1910			
Vision	R. E.—V=	4/6	R. E.—V=	
	L. E.—V=	4/6	L. E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to Cause Rejection	(b)		(b)	
Approved by (Signature)	Fred W. Borden			
(Rank)	Lieut.			
	Medical Officer.			Medical Officer.
Enlisted	at St. John's		at	
	on 28 th day of May 1915		on	day of 191
Joined on Enlistment	Corps.	1 st Q. F. L. D.	Corps.	
	Regtl. No.	1564	Regtl. No.	
Transferred to				
Became non-effective by				
	on	day of 191	on	day of 191
(Signature)				
(Rank)				



Handwritten note: M. K. [unclear] 167

Table II.—Only for admissions to hospital or to the sick list in the case of Warrant Officers treated in quarters

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3 rd LONDON GENERAL HOSPITAL WANDSWORTH.	6	7	16	16	8	16	S.V.W. TX. 1. re-ent.	41	See Form - S.V.W. Capt & Coy Wounds healed. See signal.	H. W. C. ... Capt. A. H. ... Dentist ...
4th SCOTTISH GENERAL HOSPITAL, STOBHILL, GLASGOW.	15	MAR	1917	26	5	17	Protruding Soft Chancres	73		

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.: Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.

Date	Brief Details, and Signature
<p>June 21st 1915 - 25th -</p>	<p>1st Inoculation at sea 570 Milliers J.B. Vaccinated - - - - - J.B.</p>
<p>8-1-19</p>	<p>Recommended Repatriation</p> <p><i>Woodley</i> ms. ROYAL NEWFOUNDLAND REG.</p> <p>It is hereby certified that this soldier has been before the Standing Medical Board and has been classified as <u>B</u> for discharge on Demobilisation. Medical category <u>A-111</u></p> <p><u>27-2-19</u> Date of S.M.B.</p> <p><i>J.W.S.H.</i> Captain Adjutant Adjutant Discharge Dept. Newfoundland</p>

TABLE IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation.	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
<p>Sgt John J. F. L. D.</p>					

Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

To study for M. D.

Emerson
Signature of Man.

Reg. No. 1564

B. Butler
Signature of the Vocational Officer or his Representative.

Place St. John's

Date March 4th 1919

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.
 In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps... *Royal Grenadier* } Former Trade or Occupation }
 2. Regtl. No. *15th*, 3. Rank... *Pl* } 7a. If the soldier claims previous service in Army, he should state—
 4. Name *HONISON* } (a) Former Regts. or Corps ;
 (Surname) (Christian Names) with Regtl. Nos.
 5. Age last birthday.....
 6. Posted for duty on..... at.....
 in category (or grade).....
 8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty? (b) Date of Discharge ;
 (c) Cause of Discharge.
 9. If a Court of Inquiry was held on an injury state :—
 (a) When (d) Particulars of Pension or Gratuity
 (b) Where (if any)
 (c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability.
 12. Place of origin of disability.
 13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

*G.S.W. left Leg. July 18/1916.
 He states "FB still in situ" does not cause any discomfort. Returned France Aug 1917 and returned from Review 29th Nov 1918.
 Platoon. French Sect.*

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | Yes | |
| (ii.) Previous active service | No | |
| (iii.) Climate in pre-war service | No | |
| (iv.) Ordinary military service before the war | No | |
| (v.) Serious negligence or misconduct on the man's part. } | VAG not cured. | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } U.A.

In all cases such as facial injuries, eye, ear, nose and throat disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition? *His toes are red the skin slightly tight. Complains of them easily becoming cold. Condition improving.*
- (A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

16. Was an operation performed? If so, when and what was its nature?
17. If not, was an operation advised and declined?
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

20. Do you recommend—
- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?
- Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Station

Medical Officer in charge of case.

Date

* Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of, a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) *The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

21. Give diagnosis and particulars of:—

(a) Any disability claimed or discovered.

(b) The present condition thereof.

*Y.S.W. left thigh & left wrist
He states that foreign body still present but does not cause any inconvenience.*

22. State whether the disabilities are:—

- (i) Service during the present war
- (ii) Previous active service.. .. .
- (iii) Climate in pre-war service
- (iv) Ordinary military service before the war
- (v) Serious negligence or misconduct on the part of the soldier

(a) Attributable to

(b) Aggravated by

Yes

No

Give details:

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

Y.S.W.

23. Is the disability in a final stationary condition? If not

- (a) How long is the present degree of disability likely to last?
- (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages :-100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).

nil

(b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

25. If an operation was advised and declined, was the refusal unreasonable?

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

Yes

Opinion of Military Member in case of disagreement.

OR

(b) In what other grade do the Board place him?
 (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

A III

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

No

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require :-

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures :

Station *S. P. H. S.* *[Signature]* } President or Chairman.
 Date *Feb 21/19* *[Signature]* } Members.
[Signature]

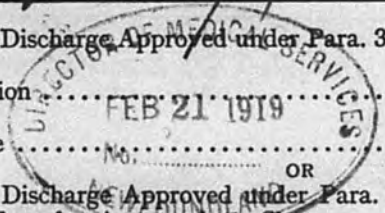
Discharge Approved under Para. 392 (xvi) King's Regulations

Station *[Signature]* } Only applicable in cases of Patients in Hospitals.
 Date Officer in charge, Central Hospital.

Discharge Approved under Para. 392 () King's Regulations.
 or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station
 Date O.C. Discharge Centre.





Descriptive Return of a Soldier Discharged on Account of Disability.

INSTRUCTIONS—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. i/c Records together with the remainder of the man's documents.

Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

Name in full *Charles Thompson*
 Regiment from which discharged *Royal Newfoundland*
 Regimental number *1564*
 Intended address *Subby Water Street West*
 Height on discharge *5 Feet 9*
 Color of hair on discharge *Brown*
 Complexion *Fair*
 Color of eyes *Blue*
 Descriptive Marks *Medic*
 Figure on discharge
 Christian name of Father *Charles Robert*
 Christian name of Mother *Mary Elbert*
 Wife's maiden name in full *—*
 Date and place of marriage *—*
 Christian names of children *—*
 Place and date of soldier's birth *St John 11-4-1899*
 Nature and locality of civil employment required

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full) *Charles Thompson*

St
(Rank)

Station *St John* Date *18-2-19*

I certify that the above named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge correct.



Medical Officer in Hospital, Unit, or Command Depot.

Station _____ Date _____

Casualty Form—Active Service.

Regiment or Corps of Newfoundland
 Rank Private Surname Thompson Christian Name Charles R.
 Religion Methodist Age on Enlistment 19 years 9 months.
 Enlisted (a) St. Johns 28/5/15 Terms of Service (duration of war) Service reckons from (a) date of enlistment
 Date of promotion to present rank ✓ Date of appointment to lance rank ✓
 Extended { ✓ } Re-engaged { ✓ } Qualification (b) ✓
 or Corps Trade and Rate ✓
 Signature of Officer James Lee



Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked <u>Hampton</u> <u>5.8.17</u>			
		Disembarked <u>Rouen</u> <u>7.8.17</u>			
		Joined Battalion			
<u>24.8.17</u>	<u>1 Stat. Troop.</u>	<u>Ad. V.A.S.</u>	<u>Rouen</u>	<u>8.9.17</u>	<u>HA 12792</u>
<u>22.9.17</u>	<u>18 B.C.S.</u>	<u>Ad. do</u>		<u>20.9.17</u>	<u>2D 934</u>
	<u>do</u>	<u>Dis to duty at</u>	<u>18 C.S.</u>	<u>20-9-17</u>	<u>Ad. 14258</u>
<u>6/10/17</u>	<u>6 C.S.</u>	<u>Ad. Grenadier</u>		<u>27-10-17</u>	<u>Ed. 2756</u>
	<u>23 C.S.</u>	<u>WITH Bn</u>	<u>30-11-17</u>	<u>29-12-17</u>	<u>Ed. 5427</u>
<u>12-1-18</u>	<u>Ad. Bn</u>	<u>Adm. Rope</u>		<u>6-1-18</u>	<u>B213</u>
"	<u>887 A</u>	<u>Ad. reliefs Grenadier Troop</u>	<u>N.2.1.18</u>	<u>2-1-18</u>	<u>Ed. 6265</u>
	<u>20th Coy</u>	<u>Found Base Depot</u>	<u>Rouen</u>	<u>16-2-18</u>	<u>Roll</u>
	<u>do</u>	<u>Dis to duty</u>	<u>"</u>	<u>1-3-18</u>	<u>Roll</u>

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c.

[P.T.O.]

1564 *W. B. Thompson*

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 26, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 26, or other official documents
Date	From whom received				
27-4-18	63 662	atml (Grossbees)	—	22-4-18	ED 801
27-4-18	4 211	atml (VDS)	Arges	25-4-18	WJ 3054 HA 22680
7/4/18	2 Aus. Co.	atml (Grossbees)	—	11-4-18	36 cos. 2/4 ED 803
15-6-18	Officers	Discharged Apr		15-6-18	P 213
	1/26 cos	atml (Grossbees)		7/10/18	ED 8056
	25 Genl M	" "	Stadelot	8/10/18	HA 30083
	1 Causey	—	Boulogne	16/10/18	HA 30399
	2 m. B.	from D & M	House	14/1/18	Ros
	—	to England's	Rouen	27/1/18	Roll
			Whad		Leapt
			For Officer i/c	No 1 Infantry Section	
			Sgt Echelon,	General Headquarters	

Casualty Form—Active Service.

985

Regiment or Corps NewfoundlandRegimental No. 1564 Rank Cike Name C. ThompsonEnlisted (a) May 26/15 Terms of Service (a) war Service reckons from (a) _____

Date of promotion to present rank } _____ Date of appointment to lance rank } _____ Numerical position on roll of N.C.Os. } _____

Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
	<u>1st Found Battalion</u>		<u>France</u>	<u>04.16</u>	<u>B213.</u>
	<u>35th Ad G.P.W. Reg</u>		<u>France</u>	<u>17.16</u>	<u>E.O. 11963.</u>
	<u>Hospital ship</u>	<u>Transferred to England</u>		<u>5.7.16</u>	<u>W3083</u> <u>Allberk</u>

CAPTAIN
FOR THE INFANTRY RECORD
G. H. Q.; 3RD ECHELO(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

DEPARTMENT OF MILITARY

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes, If any question are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, M.Y. & RECORD OFFICE, ST. JOHN'S.

Christian name *Charles*..... 2. Surname *Thomson*.....

3. Rank... *Plé*..... 4. Regtl. No. *1564*.....

5. Address in full to which future payments of gratuity are to far be forwarded... *Charles Thomson's Sudbury, Utah St. Utah*.....
.. *City*... *P.O.B. 634*.....

6. Date of enlistment in the Regiment... *28.5.15*.....

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
..... *Not applicable*.....

8. Relationship of such dependents..... *Not applicable*.....

9. Address in full of such dependent..... *Not applicable*.....

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *Not applicable*

11. Were you on active service only in Nfld. If so, give dates, and particulars of such service..... *Not applicable*.....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *3 years 294 days*.....

13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers.....

..... *Not applicable*

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid..... *Not applicable*

15. Have you been issued with a War Service Badge? *Not applicable*

16. Have you, during the present war, served in the Imperial Forces? *Not applicable*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *Not applicable*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? ~~Not applicable~~

(b). If so, was such reversion in consequence of misconduct or inefficiency? *Not applicable*

19. Are you now serving in the Regt. ~~Not applicable~~ If not give:- (a) Date of discharge *18.3.19* (b) Reason for discharge *Demobilisation*

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service.....

France & Belgium March 11. 16. - July 14. 16. - Aug 11. 17. - Nov. 27. 18.

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so, are you in receipt of full pay and allowances from that Committee..... ~~Not applicable~~ *Not applicable*

and I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.

Signature of Applicant: *Charles Moncrief Thomson*

Place of Residence: *"Sudbury" St. John's Newfoundland*

Declared before me at:

This *31st* day of *March* 19*19*

John A. Barron
Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of affidavits. *a Barrister of the Supreme Court*

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	<i>6 mos.</i>	<i>420.00</i>
.....
.....
Certified Correct.			Paymaster.	

RD BOND ISLAND

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 1564 Rank Pl. Name C. O. Thompson
 Intended place of residence New St West
 2. Occupation Student
 Classification of soldier 15 Medical Category A III

DEMOBILIZATION.

3. The above named man is discharged in consequence of.....

Eligible for War Service Gratuity

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.

Place
 Date MAR 4 1919
 for H. Mews A.
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place and date ST. JOHN'S
4-3-19
 Signature of soldier C. O. Thompson
 Signature of witness C. D. Ricko Capt.

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I ~~am~~ ^{was} in a position to resume civilian occupation immediately on discharge.

Place and Date ST. JOHN'S
4. 3. 19
 Signature of soldier C. O. Thompson
 Signature of witness T. J. Douglas Capt.

STATEMENT OF SERVICE

7. Enlisted for service 27. 5. 15 No of days on Military
 Discharged from service 4. 3. 19 16 1/2 days Service 1392 days

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.

Place ST. JOHN'S
MAR 4 1919
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed
 Place St. John's Nfld.
 Date March 18/1919
 Officer i/c Records
 The Royal Newfoundland Regiment

A.H. 2079/1307

54
30
13
7
365
71
25



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Charles Mancrief Thompson, Regl. No. 1564
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
Dollars and Fifty Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons
 concerned, viz.:

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
1	Mother	Mrs. C.R. Thompson	Sudbury Water St West St Johns	50
0				
0				
0				
Commencing June 12 th				
Total Allotment, \$				50

NOTE. This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

(Sig.) [Signature]
 Officer Commanding
 Company
St Johns
June 11th 1915

(Sig.) C. M. Thompson
 (Rank) Private

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 63 ³²/_x

Aug 7 19 19

Received from the First Newfoundland Regiment
the sum of Sixty three ³²/_x Dollars.
an account of Pay. W.S.H.
balance

W.S.H.

Ch. No.	4396	Initials.	W.S.H.
Pay Ledger	56	Initials.	W.S.H.
Gen. Ledger		Initials.	

Regtl. No. 1564 Rank S.H.

No. 1564

Rank Pt

Name C Thompson

7000
668
1332

St John's
Aug 4. 19.

C. C. Royal Newfoundland Regt.

Kindly authorize the
Paymaster to pay me balance
of Gratuity & any back
pay due me as I am leaving
for England on S. S. Digby
to-morrow.

Thanking you in
anticipation of your granting
me this
Yours sincerely
C. C. Thomson. (5562)

P.M.

Authorized please

7/8/19

L.F.H.

ST. JOHN'S, FEB 28 1919

Royal Newfoundland Regiment.

Billeting Account,

To H. C. Thompson

Billeting Soldiers as undermentioned

from Feb 8th /19 to Feb 28th /19

<u>1564 . H. C. Thompson</u>	<u>£1 60</u>
------------------------------	--------------

Certified correct for \$ £1. 60

J. H. Lawrence
A. J. to Billeting Officer.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.
[523] W12371/604 400m 2/15a-1 23 56

Forms
B. 121.
29.

Number of Sheet 1

Regiment of 1st Newfoundland

Signature of O. C. Company J. G. Bennett
2 Lines

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay	
No.	<u>1564 Thomson, Charles M.</u>	Age on	<u>19</u> years <u> </u> months	<u>None - Student</u>	<u>Promoted to Cpl. 12. 2. 17.</u>	
Joined	Date	Place and Date of Enlistment	<u>St John's May 28 - 1915</u>	Religion	<u>Deprived of Lance Stripe 31. 5. 17.</u>	
Joined	Date	Period of { with Colours <u>3</u> ⁷⁹⁵ years. with Reserve <u>365</u> years.	<u>St John's</u>	Place of Birth		
Joined	Date					

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>Newton Da Ay</u>	<u>14/12/15</u>	<u>Plt</u>		<u>Absent from 215 parade</u>	<u>Corp. Costello</u>	<u>2 days C.B.</u>	<u>15/12/15</u>	<u>Capt Ledingham</u>	
<u>dayr.</u>	<u>30.5.17</u>	<u>Lcpl.</u>		<u>1/ Absent from Guard Drill when warned</u>		<u>Deprived of</u>			
				<u>2/ Absent from Guard mounting until 16th 30.5.17</u>	<u>Sgt Sdch.</u>	<u>Lance Stripe.</u>	<u>31.5.17</u>	<u>Major Rendell.</u>	<u>1/15</u>
<u>Racecourse</u>	<u>5-7-17</u>	<u>Plt</u>		<u>1/ Late on sick parade</u>	<u>documentary</u>				
				<u>2/ Failing to report when ordered</u>		<u>5 days C.B.</u>	<u>7-7-17</u>	<u>Capt H. Rendell.</u>	<u>act</u>
"	<u>12.7.7</u>			<u>Absent from 2 attes</u>	<u>offe.</u>	<u>5 days C.B.</u>	<u>13.7.17</u>	<u>Capt H. Rendell</u>	<u>act</u>
"	<u>17.7.17</u>			<u>next reported 6.30 am 13.7.17</u>	<u>Volunteer</u>	<u>forfeits 1 day pay</u>	<u>17.7.17</u>	<u>Capt March</u>	<u>act</u>
"				<u>Absent from 6.30 am parade until found in bed at 6.45 am.</u>	<u>Csm Petric Sgt. Winsor</u>				
"	<u>20.7.17</u>			<u>In Town at 12.30 am without a pass</u>	<u>Serpt hennoc</u>	<u>3 days C.B.</u>	<u>20.7.17</u>	<u>Capt. Rendell</u>	<u>act</u>
				<u>To be carried over</u>					
				<u>Demobilized 18-3-19.</u>					

Army Form B. 121.

Russell 24.7.17 Pls.

Absent from ^{Brought forward} ~~Tahoe~~
next reported 12 midnight
same date while
marked "sick in quarters"
by M.O.

Cpl. Mackin

7 days' CB.

24.7.17

Capt. St. Russell

act

Hazley Drum 16.7.18 Pte

Absent from ^{000112^{1/2}} ~~quarters~~ until
23.59 25^{1/2} 9 days

Sgt. Grace

8 days' CB

27.7.18

Lt. Col. Barton 850

Profits 9 days' Pay ~~act~~

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.

Fold Here

OCT 15 1921

1921.

The accompanying **Victory Medal** and/or **British War Medal**
is/are forwarded herewith to

Charles M. Thomson

in respect of his service as No. 1564 Rank Pte.

Name C.M. Thomson

Royal Nfld. Regt.

~~Mtd. Forestry Corps.~~

Receipt of the same should be acknowledged hereon.

Received

British War medal & Victory medal

Signature

Charles M. Thomson

Date

November 15/21

Address

16 Elgin Rd. Heron, N. 22.

[P.T.O.]